

REQUEST FOR (OIL) - ~~(GAS)~~ ALLOWABLE

XXXXXX
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Eunice, New Mexico March 4, 1960
(Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Continental Oil Company Cline A-15, Well No. 2, in SW 1/4 SW 1/4,
(Company or Operator) (Lease)

M, Sec. 15, T. 23-S, R. 37-E, NMPM, Langlie-Mattix Pool
Unit Letter

Lea County. Date work started 2-16-60 Date work completed 2-28-60

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P
X			

Elevation 3308' KB Total Depth 3874' PBD 3612'

Top Oil/ Gas Pay 3534' Name of Prod. Form. Penrose

PRODUCING INTERVAL -

Perforations 3534-52', 3570-74', 3588-94'

Open Hole Depth 3409' Casing Shoe 3409' Depth 3569' Tubing

OIL WELL TEST - (7" Liner set at 3874')

Natural Prod. Test: bbls. oil, bbls water in hrs, min. Size Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 60 bbls. oil, 0 bbls water in 6 hrs, min. Size 16/64" Choke

GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 1000 gals acid, fraced w/10,000 gals crude, 10,000#

Casing Tubing Date first new Press. 350 Press. 150 oil run to tanks 2-29-60 sd, 250# Adomite

Oil Transporter Texas New Mexico Pipe Line Company

Gas Transporter None

Tubing, Casing and Cementing Record

Size	Feet	Sax
13 3/8	221	200
9 5/8	3428	600
2 1/2	3583	

Remarks:

This well was abandoned but not plugged in the Penrose Skelly Pool and was recompleted in the Langlie Mattix Pool.

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved: 19

Continental Oil Company
(Company or Operator)

By: (Signature)
(Signature)

Title District Superintendent
Send Communications regarding well to:

Name J. R. Parker

Address Box 68, Eunice, New Mexico

OIL CONSERVATION COMMISSION

By: (Signature)

Title

0/3 NMOC WAM file